

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0115
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. SF-080724-A
2. NAME OF OPERATOR Union Texas Petroleum	6. IF INDIAN, ALLOTTEE OR TRIBE NAME N/A
3. ADDRESS OF OPERATOR 375 U.S. Highway 64, Farmington, New Mexico 87401	7. UNIT AGREEMENT NAME N/A
4. LOCATION OF WELL (Report location clearly and in accordance with any State regulations. See also space 17 below.) At surface 1055' FNL & 1015' FWL	8. FARM OR LEASE NAME ZACHRY
14. PERMIT NO.	9. WELL NO. 59
15. ELEVATIONS (Show whether on FNL or FWL) 5641 GL, 5653 KB	10. FIELD AND POOL, OR WILDCAT Otero Chacra
	11. SEC., T., R., M., OR SLE. AND SURVEY OR AREA Section 33-T29N-R10W
	12. COUNTY OR PARISH San Juan
	13. STATE NM

JAN 16 1987

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Production casing</u> <input checked="" type="checkbox"/>	

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Union Texas Petroleum wishes to advise that a 6-3/4" hole was drilled to 3150'. Run 2-7/8", 6.5#, K-55 casing to 3133', cementing to surface with 250 sxs (718 cu.ft.) 65/35 POZ containing 12% gel and 12-1/4# gilsonite/sk, tailed by 200 sxs (314 cu.ft.) 50/50 POZ containing 4% gel, 6-1/4# gilsonite/sk and 10# salt/sk. Circulate 2 bbls (11 cu.ft.) of cement to surface.

RECEIVED
JAN 26 1987
OIL CON. DIV
DIST. 3

I, hereby certify that the foregoing is true and correct

SIGNED Robert C. Frank

TITLE Permit Coordinator

DATE 01/09/1987

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

JAN 23 1987

FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side

NMOCOI

BY 334